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Practilloner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used):							
	Name		Registration Number N		lame	Registration Number	
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ļ.,	····				······································		
as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b).							
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Assignee Name and Address: Sulvanus's Capital L.L.C.							
2711 Centerville Rd, Suite 400							
Autn: Dept 307 Wilmington, DE 19808							
"Almangoon, and about							
A copy of this form, together with a statement under 37 CFR 3:73(b) (Form PTO/SB/96 or equivalent) is required to be							
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SIGNATÜRE of Assignee of Record							
The individual whose signature and title is supplied below is authorized to not on behalf of the assignce							
Signature	(In	und Brades	,		Date Nov. 17,2	<i>8</i> 76	
Name		l Bradley	<del>1641-1644-1644-1644-1644-1644-1644-1644</del>		Telephone		
Thle	The Authorized Person, Sulvanuss Capital L.L.C.						
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